

<b>SCC eFile</b>	<b>2013 ANNUAL REPORT</b> <b>COMMONWEALTH OF VIRGINIA</b> <b>STATE CORPORATION COMMISSION</b>	<b>213553504</b>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME:  <b>Trinity Services Group, Inc.</b></p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:  <b>CT CORPORATION SYSTEM</b>  <b>4701 COX ROAD, SUITE 285</b>  <b>GLEN ALLEN, VA</b></p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE:  <b>HENRICO COUNTY</b></p> <p>4.) STATE OR COUNTRY OF INCORPORATION:  <b>FL</b></p> </div> <div style="width: 35%;"> <p>DUE DATE: <b>12/31/2013</b></p> <p>SCC ID NO: <b>F1915117</b></p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>7,500</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMMON	7,500	
CLASS	AUTHORIZED						
COMMON	7,500						
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="text-align: center;">ADDRESS: 380 SCARLETT BLVD</p> <p style="text-align: center;">CITY/ST/ZIP: OLDSMAR, FL 34677</p>							
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS:      All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>							
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: MATT SANFORD  TITLE: DIRECTOR  ADDRESS: 477 Commerce Blvd.  CITY/ST/ZIP/CO: OLDSMAR, FL 34677 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">OFFICER</td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">DIRECTOR</td> </tr> </table>			NAME: MATT SANFORD TITLE: DIRECTOR ADDRESS: 477 Commerce Blvd. CITY/ST/ZIP/CO: OLDSMAR, FL 34677	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
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<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: Jim Long  TITLE: CEO  ADDRESS: 477 Commerce Blvd.  CITY/ST/ZIP/CO: Oldsmar, FL 34677 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">OFFICER</td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">DIRECTOR</td> </tr> </table>			NAME: Jim Long TITLE: CEO ADDRESS: 477 Commerce Blvd. CITY/ST/ZIP/CO: Oldsmar, FL 34677	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
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NAME:	Magda Farren	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CAccountingO		
ADDRESS:	477 Commerce Blvd.		
CITY/ST/ZIP/CO:	Oldsmar, FL 34677		
NAME:	Dominick Varacalli	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	477 Commerce Blvd		
CITY/ST/ZIP/CO:	Oldsmar, FL 34677		
NAME:	Chris Watt	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	477 Commerce Blvd.		
CITY/ST/ZIP/CO:	Oldsmar, FL 34677		
NAME:	Bill Terry	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	477 Commerce Blvd.		
CITY/ST/ZIP/CO:	Oldsmar, FL 34677		
NAME:	Tom English	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	477 Commerce Blvd.		
CITY/ST/ZIP/CO:	Oldsmar, FL 34677		
NAME:	Victor Rendon	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	477 Commerce Blvd.		
CITY/ST/ZIP/CO:	Oldsmar, FL 34677		
NAME:	Steve Sleigh	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	477 Commerce Blvd.		
CITY/ST/ZIP/CO:	Oldsmar, FL 34677		
NAME:	Mark Keller	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	477 Commerce Blvd.		
CITY/ST/ZIP/CO:	Oldsmar, FL 34677		
NAME:	Mark Dennis	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	477 Commerce Blvd.		
CITY/ST/ZIP/CO:	Oldsmar, FL 34677		
NAME:	Patrick Tolliver	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	477 Commerce Blvd.		
CITY/ST/ZIP/CO:	Oldsmar, FL 34677		
NAME:	Elaine Isenberg	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	477 Commerce Blvd.		
CITY/ST/ZIP/CO:	Oldsmar, FL 34677		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Khadeeja Morse CHRO 477 Commerce Blvd. Oldsmar, FL 34677	<input checked="checked" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ LARRY G VAUGHN	LARRY G VAUGHN, PRESIDENT	11/5/2013	
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			